POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	75316	9/14/00
O.I.P.E. CLASSIFIER		10	9/20/00
FORMALITY REVIEW	AF	824	10/18/20
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected		N .... Non-elected	
= .... Allowed		I .... Interference	
– (Through numeral)... Canceled		A .... Appeal	
÷ .... Restricted		O .... Objected	

Claim		Date
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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